

STATE OF NORTH CAROLINA

File No.

_____ County

In The General Court Of Justice
Superior Court Division Before The Clerk

Name Of Petitioner(s)

PARTITION PROCEEDINGS SUMMONS☐ ALIAS AND PLURIES SUMMONS

G.S. 1-394

VERSUS

Name Of Respondent(s)

Date Original Summons Issued

Date(s) Subsequent Summons(es) Issued

To Each Of The Respondent(s) Named Below:

Name And Address Of Respondent 1

Name And Address Of Respondent 2

A Partition Proceeding Has Been Commenced Against You!

You are notified to appear and answer the attached petition as follows:

1. File a written answer in the office of the Clerk of Superior Court for the county named above within 30 days of the date you were served.
2. Serve a copy of your written answer on the petitioner or the petitioner's attorney by personal delivery or mail at the address listed below.

If you fail to answer the petition, the petitioner may apply to the Court for the relief demanded in the petition.

Name And Address Of Petitioner's Attorney (If None, Address Of Petitioner)

Date Issued

Time Issued

☐ AM ☐ PM

Signature

☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court☐ **ENDORSEMENT**

This Summons was originally issued on the date indicated above and returned not served. At the request of the petitioner, the time within which this Summons must be served is extended sixty (60) days.

Date Of Endorsement

Time

☐ AM ☐ PM

Signature

☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior CourtOriginal-File Copy-Each Respondent Copy-Attorney/Petitioner
(Over)

RETURN OF SERVICE

I certify that this Summons and a copy of the petition were received and served as follows:

RESPONDENT 1*Date Served**Time Served*☐ AM☐ PM*Name Of Respondent*

☐ By delivering to the respondent named above a copy of the summons and petition.

☐ By leaving a copy of the summons and petition at the dwelling house or usual place of abode of the respondent named above with a person of suitable age and discretion then residing therein.

Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)

☐ Service accepted by respondent

*Date Accepted**Signature*

☐ Other manner of service *(specify)*

☐ Respondent WAS NOT served for the following reason:

RESPONDENT 2*Date Served**Time Served*☐ AM☐ PM*Name Of Respondent*

☐ By delivering to the respondent named above a copy of the summons and petition.

☐ By leaving a copy of the summons and petition at the dwelling house or usual place of abode of the respondent named above with a person of suitable age and discretion then residing therein.

Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)

☐ Service accepted by respondent

*Date Accepted**Signature*

☐ Other manner of service *(specify)*

☐ Respondent WAS NOT served for the following reason:

*Date Received**Signature Of Deputy Sheriff Making Return**Date Of Return**Name Of Deputy Sheriff (Type Or Print)**County Of Sheriff*